

NONVIOLENT CRISIS INTERVENTION



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NONVIOLENT CRISIS INTERVENTION






- **DEFINITION:** A SAFE, NON-HARMFUL BEHAVIOR MANAGEMENT SYSTEM DESIGNED TO HELP HUMAN SERVICE WORKERS PROVIDE FOR THE BEST POSSIBLE CARE AND WELFARE OF ASSAULTIVE, DISRUPTIVE OR OUT-OF-CONTROL PERSONS EVEN DURING THE MOST VIOLENT MOMENT.
- **PURPOSE:** PROVIDE STAFF AND CLIENTS WITH THE BEST CARE, WELFARE, SAFETY AND SECURITY POSSIBLE

UNIT I

CRISIS DEVELOPMENT



OBJECTIVES

-  **DEFINE CRISIS DEVELOPMENT IN TERMS OF FOUR DISTINCT AND IDENTIFIABLE BEHAVIOR LEVELS**
-  **MATCH EACH CRISIS DEVELOPMENT BEHAVIOR WITH AN APPROPRIATE CORRESPONDING STAFF ATTITUDE**
-  **PROVIDE THE BEST POSSIBLE CARE AND WELFARE FOR OUR STAFF AND CLIENTS**

CRISIS DEVELOPMENT MODEL



CRISIS DEVELOPMENT

1. ANXIETY

ANXIETY:

A NOTICEABLE INCREASE
OR CHANGE IN BEHAVIOR,
E.G., PACING, FINGER
DRUMMING, WRINGING OF
THE HANDS, STARING

STAFF ATTITUDES

1. SUPPORTIVE

SUPPORTIVE:

AN EMPATHIC,
NONJUDGEMENTAL
APPROACH ATTEMPTING TO
ALLEVIATE ANXIETY

CRISIS DEVELOPMENT MODEL



CRISIS DEVELOPMENT

1. ANXIETY
2. **DEFENSIVE**


DEFENSIVE: THE BEGINNING STAGE OF LOSS OF RATIONALITY - AT THIS POINT AN INDIVIDUAL OFTEN BECOMES BELLIGERENT AND CHALLENGES AUTHORITY

STAFF ATTITUDES

1. SUPPORTIVE
2. **DIRECTIVE**

DIRECTIVE: AN APPROACH IN WHICH A STAFF MEMBER TAKES CONTROL OF A POTENTIALLY ESCALATING SITUATION BY SETTING LIMITS

CRISIS DEVELOPMENT MODEL



CRISIS DEVELOPMENT

1. ANXIETY
2. DEFENSIVE
3. **ACTING OUT PERSON**

ACTING OUT PERSON:

THE TOTAL LOSS OF
CONTROL WHICH OFTEN
RESULTS IN A PHYSICAL
ACTING OUT EPISODE

STAFF ATTITUDES

1. SUPPORTIVE
2. DIRECTIVE
3. **NONVIOLENT PHYSICAL
CRISIS PREVENTION**

NPCI: SAFE, NONHARMFUL
CONTROL AND RESTRAINT
TECHNIQUES USED TO SAFELY
CONTROL AN INDIVIDUAL
UNTIL HE CAN REGAIN
CONTROL OF HIS BEHAVIOR.

**THESE TECHNIQUES
SHOULD BE USED AS LAST
RESORT**

CRISIS DEVELOPMENT MODEL



CRISIS DEVELOPMENT

1. ANXIETY
2. DEFENSIVE
3. ACTING OUT PERSON
- 4. TENSION REDUCTION**

TENSION REDUCTION:
DECREASE IN PHYSICAL
AND EMOTIONAL ENERGY
WHICH OCCURS AFTER A
PERSON HAS ACTED OUT,
REGAINS RATIONALITY

STAFF ATTITUDES

1. SUPPORTIVE
2. DIRECTIVE
3. NONVIOLENT PHYSICAL
CRISIS PREVENTION
- 4. THERAPEUTIC RAPPORT**




THERAPEUTIC RAPPORT:
AN ATTEMPT TO RE-ESTABLISH
COMMUNICATION WITH AN
INDIVIDUAL WHO IS IN THE
TENSION REDUCTION STAGE

UNIT II

NONVERBAL BEHAVIOR



OBJECTIVES


-  **PROVIDE AWARENESS OF NONVERBAL COMMUNICATION DURING INTERVENTIONS**
-  **ILLUSTRATE HOW PERSONAL SPACE OR PROXEMICS AFFECTS THE ANXIETY LEVEL OF AN INDIVIDUAL**
-  **ILLUSTRATE HOW BODY POSTURE AND MOTION OR KINESICS AFFECTS THE ANXIETY LEVEL OF AN INDIVIDUAL**

UNIT II

NONVERBAL BEHAVIOR



OBJECTIVES

 **EMPHASIZE DE-ESCALATION OF A CRISIS
DEVELOPMENT SITUATION BY FOSTERING
AWARENESS OF NONVERBAL COMMUNICATION**

 **PROVIDE THE BEST POSSIBLE CARE AND WELFARE
FOR OUR CLIENTS**

NONVERBAL BEHAVIOR



◆ PROXEMICS (PERSONAL SPACE)

✎ VARIES FROM ONE PERSON TO ANOTHER
DEPENDING ON THE PERSON APPROACHING &
CONTEXT OF SITUATION, IN NORTH AMERICA; IT IS
APPROXIMATELY 1-1/2 TO 3 FEET

✎ FACTORS: GENDER, LOOKS, CULTURE, PREVIOUS
EXPERIENCES, AGE, EMOTIONAL STATE,
ENVIRONMENT

NONVERBAL COMMUNICATION



◆ KINESICS (BODY LANGUAGE)

➡ INCLUDES FACIAL EXPRESSIONS,
GESTURES, POSTURE AND MOVEMENTS

➡ STAFF KINESIC BEHAVIOR CAN SERVE TO
ESCALATE OR DE-ESCALATE A GIVEN
SITUATION

THE CPI SUPPORTIVE STANCE



◆ REASONS FOR USING STANCE:

- ✎ RESPECTS CLIENT'S PERSONAL SPACE




- ✎ NON-THREATENING, NON-CHALLENGING, OFFERS AN ESCAPE ROUTE

- ✎ CONTRIBUTES TO STAFF'S PERSONAL SAFETY IF ATTACKED

UNIT III

PARAVERBAL COMMUNICATION

OBJECTIVES:

-  **FOSTER AWARENESS: HOW A VERBAL STATEMENT IS DELIVERED IS EQUALLY, IF NOT MORE IMPORTANT, THAN THE ACTUAL WORDS USED**
-  **IDENTIFY THE THREE KEY COMPONENTS INVOLVED IN PARAVERBAL COMMUNICATION**
-  **PROVIDE THE BEST POSSIBLE CARE AND WELFARE FOR OUR STAFF & CLIENTS**

PARAVERBAL COMMUNICATION MODEL



◆ LINK BETWEEN VERBAL AND NONVERBAL COMMUNICATION

👉 **TONE** - AVOID NEGATIVE SARCASMS

👉 **VOLUME** - DISTANCE AND SITUATION

👉 **CADENCE** - RATE AND RHYTHM OF DELIVERY


UNIT IV

VERBAL INTERVENTION



OBJECTIVES

 IDENTIFY DIFFERENT LEVELS OF DEFENSIVE BEHAVIOR



 REACT TO THE VERBALLY ACTING OUT PERSON WITH AN APPROPRIATE VERBAL RESPONSE TO DEFUSE THE POTENTIAL CRISIS SITUATION

UNIT IV

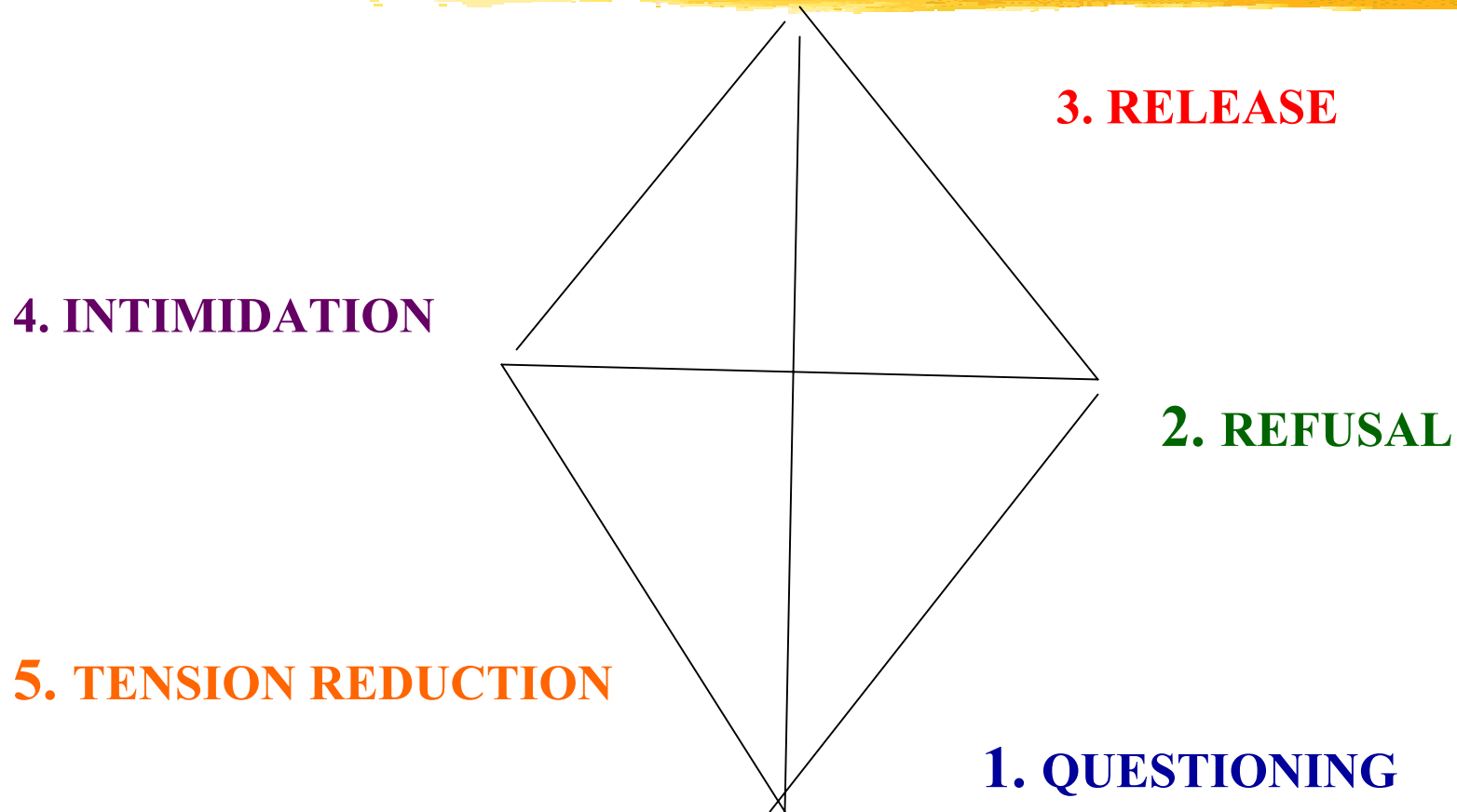
VERBAL INTERVENTION



OBJECTIVES

-  **ILLUSTRATE HOW INAPPROPRIATE STAFF REACTIONS MAY CAUSE AN ESCALATION IN BEHAVIOR**
-  **PROVIDE THE BEST POSSIBLE CARE AND WELFARE FOR OUR CLIENTS**

VERBAL ESCALATION CONTINUUM



VERBAL ESCALATION CONTINUUM



◆ QUESTIONING:

☞ INFORMATION SEEKING: A RATIONAL QUESTION SEEKING RATIONAL RESPONSE

☞ CHALLENGING: QUESTIONING AUTHORITY OR BEING EVASIVE

◆ INTERVENTION

☞ GIVE A RATIONAL RESPONSE

☞ STAY ON TOPIC, SET LIMITS

VERBAL ESCALATION CONTINUUM



◆ REFUSAL:

👉 NONCOMPLIANCE, SLIGHT LOSS OF
RATIONALIZATION

◆ INTERVENTION:

👉 SET LIMITS

- CLEAR AND SIMPLE
- REASONABLE
- ENFORCEABLE

VERBAL ESCALATION CONTINUUM



◆ RELEASE:

✎ ACTING OUT, EMOTIONAL OUTBURST, LOSS OF RATIONALITY, VENTING, SCREAMING, SWEARING... HIGH ENERGY OUTPUT

◆ INTERVENTION:

✎ ALLOW VENTING, REMOVE AUDIENCE OR CLIENT, RESTATE LIMITS, BE PREPARED TO ENFORCE LIMITS

➤ CLEAR AND SIMPLE

➤ REASONABLE

➤ ENFORCEABLE

VERBAL ESCALATION CONTINUUM

◆ INTIMIDATION:

- 👉 INDIVIDUAL IS VERBALLY AND/OR NONVERBALLY THREATENING STAFF IN SOME MANNER
- 👉 HANDS-ON APPROACH AT THIS POINT MAY TRIGGER PHYSICAL ACTING OUT BEHAVIOR

◆ INTERVENTION:

- 👉 SEEK ASSISTANCE AND WAIT FOR TEAM INTERVENTION
- 👉 TRY TO AVOID INTERVENTION WHICH IS MORE LIKELY TO JEOPARDIZE THE SAFETY AND WELFARE OF BOTH STAFF AND CLIENTS

VERBAL ESCALATION CONTINUUM

◆ TENSION REDUCTION:

- ✎ DROP IN ENERGY WHICH OCCURS AFTER EVERY CRISIS SITUATION, WHETHER IT IS AFTER LOW LEVEL DEFENSIVE BEHAVIORS OR AFTER INTIMIDATION

◆ INTERVENTION:

- ✎ ESTABLISH THERAPEUTIC RAPPORT
 - RE-ESTABLISH COMMUNICATION WITH THE CLIENT

SETTING LIMITS

- ◆ RECOGNIZE THAT YOU CANNOT FORCE INDIVIDUALS TO ACT APPROPRIATELY
- ◆ YOU ARE OFFERING THEM CHOICES AND STATING CONSEQUENCES
 - ◆ STATE POSITIVE CHOICES FIRST
- ◆ SIMPLE AND CLEAR
- ◆ REASONABLE
- ◆ ENFORCEABLE

VERBAL INTERVENTION TIPS & TECHNIQUES



DO

REMAIN CALM

ISOLATE THE SITUATION

ENFORCE LIMITS

LISTEN

BE AWARE OF NONVERBALS

BE CONSISTENT

DON'T

OVERREACT

GET IN POWER STRUGGLE

MAKE FALSE PROMISE

FAKE ATTENTION

BE THREATENING

USE JARGON

VERBAL INTERVENTION TIPS & TECHNIQUES

◆ EMPATHIC LISTENING

☞ BE NONJUDGEMENTAL

☞ GIVE INDIVIDUAL ATTENTION

☞ LISTEN CAREFULLY TO WHAT THE PERSON IS
REALLY SAYING

☞ ALLOW SILENCE FOR REFLECTION

☞ USE RESTATEMENT TO CLARIFY MESSAGES

UNIT V

PRECIPITATING FACTORS



OBJECTIVES

 **IDENTIFY UNDERLYING FACTORS WHICH
PRECIPITATE ACTING OUT BEHAVIOR**

 **MAINTAIN PROFESSIONAL ATTITUDES
DURING ACTING OUT BEHAVIOR BY USING
RATIONAL DETACHMENT**

UNIT V

PRECIPITATING FACTORS



OBJECTIVES

 **UNDERSTAND THE CAUSE/EFFECT
RELATIONSHIP BETWEEN STAFF AND
CLIENT DURING CRISIS INTERVENTION**

 **PROVIDE THE BEST POSSIBLE CARE AND
WELFARE FOR OUR STAFF & CLIENTS**

PRECIPITATING FACTORS



- ◆ **DEFINITION:** INTERNAL OR EXTERNAL CAUSES OF AN ACTING OUT BEHAVIOR OVER WHICH THE STAFF HAS LITTLE OR NO CONTROL
- ◆ **EXAMPLES:** DRUG USE, ALCOHOL USE, FINANCIAL PROBLEMS, DOMESTIC PROBLEMS, PEER PRESSURE, EMPLOYMENT CHANGES

RATIONAL DETACHMENT

◆ **DEFINITION:** ABILITY TO STAY IN CONTROL OF ONE'S OWN BEHAVIOR AND NOT TAKE ACTING OUT BEHAVIOR PERSONALLY

- ✎ MAY NOT BE ABLE TO CONTROL PRECIPITATING FACTORS, BUT CAN CONTROL OWN BEHAVIOR AND RESPONSES
- ✎ PROFESSIONAL BEHAVIOR MAINTAINED SO THAT WE MAY CONTROL SITUATION WITHOUT OVERREACTING
- ✎ STAFF NEED TO FIND POSITIVE OUTLETS FOR THE NEGATIVE ENERGY ABSORBED FROM ACTING OUT CLIENT

INTEGRATED EXPERIENCE



◆ **DEFINITION:** THE CONCEPT THAT BEHAVIORS AND ATTITUDES OF STAFF IMPACT ON BEHAVIORS AND ATTITUDES OF CLIENTS AND VICE VERSA

➡ CLIENTS DO NOT ACT OUT IN A VACUUM

➡ IF WE STAY IN CONTROL, WE CAN DISPLAY A POSITIVE ACTION WHICH WILL NOT ESCALATE THE CLIENT'S BEHAVIOR

UNIT VI

STAFF FEAR & ANXIETY



OBJECTIVES

 **UNDERSTAND THE FEAR**

 **IDENTIFY THE PRODUCTIVE AND
NONPRODUCTIVE BEHAVIORS
CAUSED BY FEAR**

UNIT VI

STAFF FEAR & ANXIETY



OBJECTIVES

 **LEARN HOW TO MAKE FEAR/ANXIETY WORK
FOR YOU IN A CRISIS SITUATION**

 **PROVIDE THE BEST CARE AND WELFARE
FOR OUR CLIENTS**

FEAR & ANXIETY



UNPRODUCTIVE

FREEZE - INABILITY TO
REACT

OVERREACTING -
RATIONAL, BUT NOT TO
THIS SITUATION

INAPPROPRIATE RESPONSE
- VERBAL OR PHYSICAL

PRODUCTIVE

INCREASE SPEED &
STRENGTH

INCREASE IN SENSORY
ACUITY

SHORTENS REACTION TIME

FEAR & ANXIETY



◆ WAYS TO CONTROL FEAR & ANXIETY

👉 UNDERSTAND WHAT MAKES US AFRAID

👉 LEARN TECHNIQUES TO PROTECT
OURSELVES AND ACTING OUT CLIENT

FEAR & ANXIETY



◆ WAYS TO CONTROL FEAR & ANXIETY

👉 USE A TEAM APPROACH - DON'T RESPOND ALONE



👉 LEARN TECHNIQUES TO CONTROL ACTING OUT PERSON, IF NECESSARY

UNIT VII

PERSONAL SAFETY



OBJECTIVES

-  IDENTIFY SOME FORMS OF PHYSICAL ATTACKS & BASIC PRINCIPLES OF PERSONAL SAFETY
-  DEMONSTRATE & PRACTICE PERSONAL SAFETY TECHNIQUES TO AVOID INJURY TO STAFF AND CLIENTS

UNIT VII

PERSONAL SAFETY



OBJECTIVES

 **BUILD CONFIDENCE IN STAFF'S ABILITY TO
KEEP THEMSELVES SAFE**

 **PROVIDE BEST POSSIBLE CARE AND
WELFARE TO STAFF AND CLIENTS**

PERSONAL SAFETY TECHNIQUES

STRIKES

SLAP

PUNCH

KICK

SCRATCH

STAB

THROW OBJECT

SPIT

DEFINITION: AN OBJECT
COMING IN CONTACT WITH A
TARGET

GRABS

BITE

HAIR PULL

CHOKE

WRIST PULL

DEFINITION: ATTEMPT TO
CONTROL & CAUSE BODILY
INJURY

PRINCIPLES OF PERSONAL SAFETY



◆ STRIKE

- ✎ MOVE THE TARGET
- ✎ BLOCK THE OBJECT

◆ GRAB



- ✎ PHYSIOLOGICAL ADVANTAGE
 - FIND THE WEAK POINT, USE LEVERAGE, USE MOMENTUM
- ✎ PSYCHOLOGICAL ADVANTAGE
 - STAY CALM, HAVE A PLAN, GET HELP

UNIT X

POSTVENTION



OBJECTIVES



-  **RECOGNIZE THE FINAL BEHAVIOR LEVEL OF AN ACTING OUT PERSON AND THE APPROPRIATE STAFF RESPONSE**
-  **HELP THE CLIENT EXAMINE ALTERNATIVE BEHAVIORS TO ACTING OUT**

UNIT X

POSTVENTION



OBJECTIVES

-  **COMMUNICATE WITH TEAM MEMBERS AFTER THE CRISIS INTERVENTION**
-  **PROVIDE THE BEST POSSIBLE CARE AND WELFARE FOR STAFF AND CLIENTS**

CPI **COPING MODEL**



◆ CLIENT

CONTROL - COMPLIANCE, FOLLOW UP ASAP

ORIENT - FIND THE FACTS, LISTEN TO CLIENT

PATTERNS - HISTORY, CYCLING, PRECIPITATING
FACTORS

CPI COPING MODEL



◆ CLIENT

INVESTIGATE - OPTIONS OF BEHAVIOR,
BRAINSTORM WITH CLIENT

NEGOTIATE - CONTRACT FOR BETTER FUTURE
BEHAVIOR, LIMITS AND CONSEQUENCES

GIVE - RESPONSIBILITY TO THE CLIENT FOR THE
CONTRACT, BRING CLOSURE TO THE EVENT

CPI **COPING MODEL**



◆ STAFF

CONTROL - WRITE DOWN OWN PERSPECTIVE,
FOLLOW UP ASAP

ORIENT - FIND THE FACTS OF INTERVENTION,
BIG PICTURE

PATTERNS - HISTORY, WHAT WENT WELL,
WHAT NEEDS CHANGING

CPI **COPING** MODEL



◆ STAFF

INVESTIGATE -SOLUTIONS FOR PROBLEMS,
BRAINSTORM

NEGOTIATE - WITH TEAM TO CHANGE ONE OR
TWO THINGS

GIVE - THANKS TO TEAM FOR SHOWING UP,
CLOSURE

QUESTIONS ???? ?

